

Message Text

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PAGE 01 TEHRAN 05781 01 OF 02 180720Z
ACTION SCS-06

INFO OCT-01 NEA-11 ISO-00 CA-01 L-03 MED-03 SS-15
HEW-06 AID-05 HA-05 OPR-02 A-01 /059 W
-----121357 180727Z /21
R 151143Z JUN 78
FM AMEMBASSY TEHRAN
TO SECSTATE WASHDC 8939

UNCLAS SECTION 1 OF 2 TEHRAN 05781

E.O. 11652: N/A
TAGS: CASE, AMED, IR
SUBJ: CHILD ABUSE CASE

REFS: A. 76 TEHRAN 6840, B. TEHRAN 3211, C. TEHRAN SVC 0018,
D. STATE 102859

1. EMBASSY APPRECIATES THE DEPARTMENT'S CONCERN OVER CHILD ABUSE BUT DOES WISH TO NOTE THAT REF B WAS INADVERTENTLY TRANSMITTED, WAS ESSENTIALLY A DRAFT AND WAS CANCELLED BY REF C. NONETHELESS, THIS RESPONDS TO QUESTIONS RAISED IN REF D.

2. ADDITIONALLY, PLEASE ADVISE SOONEST IF THE DEPARTMENT HAS A STANDARD POLICY, SUCH AS IN 3 FAM 695 ON ALCOHOL AND DRUG ABUSE, RELATING TO CHILD ABUSE CASES AND/OR GUIDANCE ON WHAT ACTION TO TAKE SHOULD SUCH A CASE ARISE WITHIN THE OFFICIAL AMERICAN COMMUNITY.

3. THE EMBASSY REGRETS IF IT APPEARED TO EXAGGERATE THE PROBLEM OF CHILD ABUSE WITHIN THE AMERICAN COMMUNITY IRAN. WE ARE NOT "OVER OUR HEADS" WITH THE PHENOMENON. CONSENSUS AMONG AMERICAN COMMUNITY MEDICAL AND COUNSELING PROFESSIONALS AS WELL AS RESPONSIBLE USG OFFICIALS IS THAT THE FACTOR IS PROBABLY WITHIN THE RANGE OF INCIDENCE EXPERIENCED IN A COMMUNITY OF EQUAL SIZE IN THE U.S.
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4. OUR INTEREST IN THE PROBLEM IS NOT NEW. STUDIES WERE UNDERWAY IN 1976 WHICH CULMINATED IN THE ESTABLISHMENT OF THE NOW WELL-OPERATING SOCIAL DEVELOPMENT CENTER OF TEHRAN (SDC), A US-TYPE MENTAL HEALTH CENTER SUPPORTED BY M/MED. WE THEN FOCUSED ON CHILD ABUSE AS ONE OF MANY ISSUES IN THE BROAD RANGE OF MENTAL HELATH PROBLEMS WE

WANTED TO ADDRESS. RE A WAS ONE SUMMARY OF OUR SURVEY OF AMERICAN COMMUNITY MEDICAL/MENTAL HEALTH PROBLEMS AND PARA 2.D. DISCUSSED THE CHILD ABUSE INCIDENCE AND PROFILE.

5. EMBASSY'S RECENT FOCUS ON CHILD ABUSE COINCIDES WITH THE RAISING OF QUESTIONS BY THE SDC, QUESTIONS RELATING TO OUR LEGAL ENVIRONMENT, THE HANDLIN OF INFORMATION VIS-A-VIS THE PRIVACY AND FREEDOM OF INFORMATION ACTS AND, MOST IMPORTANTLY, THE IMPLICATIONS, E.G. PERSONAL LIABILITY ISSUES, OF HOW CASES ARE HANDLED WHEN THEY HAVE GONE BEYOND THE REACH OF EXISTING SERVICES, I.E. WHEN ABUSES REJECT OR PREMATURELY TERMINATE COUNSELING. U.S. INSTITUTIONS HERE DO NOT, OR SO WE PERCEIVE, ENJOY THE LEGAL REQUIREMENTS OR IMMUNITIES EXTANT IN THE FIFTY STATES WHERE, IN GENERAL, SPECIFIED PUBLIC INSTITUTIONS MUST INFORM POLICE AUTHORITIES OF SUSPECTED CHILD ABUSE. ADDING TO THIS FACTOR IS OUR RELATIONSHIP WITH IRANIAN LAW AND PRACTICE ON CHILD ABUSE, BOTH OF WHICH ARE LARGELY VAGUE DESPITE OUR BEST EFFORTS SINCE CHILD ABUSE PRACTICE GENERALLY HAS NOT BEEN IDENTIFIED AS A LOCAL SOCIAL CONCERN OR AN OBJECT OF SPECIFIC LEGAL/MEDICAL RSPONSE.

6. THE FOREGOING EXPLAINS THE EMBASSY'S DESIRE FOR SOME GUIDANCE IN THE CHILD ABUSE AREA. REF D WHILE UNCLASSIFIED

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HELPFUL DID NOT ADDRESS THOROUGHLY THE LIABILITY ISSUES WHICH CONCERN US. WE APPRECIATE THAT INsofar AS CONSULAR RESPONSIBILITIES EXTEND TO PROTECTION OF AMERICAN CITIZENS WE MUST CONTINUE IN MANY INSTANCES TO EXERCISE "BEST JUDGEMENT" IN THIS ENVIRONMENT. THE SDC BOARD, IN LIGHT OF TWO "RUNAWAY" CHILD ABUSE CASES AND THE FACT THAT ITS STAFF FEARS THE LEGAL CONSEQUENCES OF REFERRING THEM EITHER TO THE ABUSERS' EMPLOYERS OR GOI AUTHORITIES, RECENTLY ADOPTED THE FOLLOWING POLICY: BEGIN QUOTE: THE SDC PROFESSIONAL STAFF, HAVING DETERMINED A PRESENT OR IMMINENT THREAT TO THE LIFE OR WELL-BEING OF AN AMERICAN CITIZEN, AN AMERICAN CITIZEN'S NON-IRANIAN SPOUSE OR AMERICAN CITIZENS MINOR DEPENDENTS IN IRAN MAY INFOM THE UNITED STATES CONSUL GENERAL OR HIS REPRESENTATIVE. END QUOTE

7. THE FOLLOWING RESPONSES ARE KEYED TO QUESTIONS IN PARA 7, REF D. AN APPARENT, INHERENT INCONSISTENCY IN PARA 9, REF D RELATES TO OUR PRESENT AND FUTURE ABILITY TO PROVIDE THE KIND OF DETAILS CONCERNING CHILD ABUSE CASES WHICH THE DEPARTMENT SOLICITS, E.E. THE MAINTENANCE OF "INFORMAL MEMORY-JOGGING NOTES,"

IN CONTRAST WITH A "SYSTEM OF RECORDS" WHICH WOULD PLACE
THE EMBASSY (AND THE SDC AS RECIPIENT OF USG GRANT?)
UNDER 552A OF THE PRIVACY ACT. ANSWERS REFLECT
CONTRIBUTIONS BY THE ARMISH-MAAG (A-M) MENTAL HYGIENE
CLINIC, THE SDC, THE SOCIAL SERVICES OFFICE OF TEHRAN
AMERICAN SCHOOL (TAS) AS WELL AS THE CONSULATES.

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R 151143Z JUN 78
FM AMEMBASSY TEHRAN
TO SECSTATE WASHDC 8940

UNCLAS SECTION 2 OF 2 TEHRAN 05781

A. THE ISSUE OF "SIGNIFICANT NUMBER OF CHILD ABUSE
CASES" WAS ADDRESSED IN PARA 2 AND THE CHARACTERIZATION
DERIVES FROM REF A. CENSUS DONE FOR CURRENT RESPONSE
BROUGHT COMMENTS THAT INCLUDED, "WE ARE CLEARLY NOT
INFORMED OF THE EXTENT OF THE PROBLEM," PARTICULARLY
WAS THIS SUSPECTED IN THE A-M CASELOAD. CENSUS REVEALED:
(1) TAS 1977/78 SCHOOL YEAR (APPROX 3,000 STUDENTS):
14 CASES IN ELEMENTARY AND MIDDLE SCHOOLS (ONE OVERLAPS
SDC: 8 OF 13 REFERRED TO SDC DDI NOT GO). INCLUDES
NEGLECT, ONE EMOTIONAL WITHOUT PHYSICAL ABUSE, NONE
SEVERE ABUSE, SUCH AS BURNS, HIGH SCHOOL-5 CASES (ONE
OVERLAPS SDC CASELOAD). (IN REF A, TAS REPORTED 27
CASES IN 7 MONTHS). (2) SDC: 17 CASES IN 15 MONTHS
OPERATION: INCLUDE ABUSE AS WELL AS NEGLECT, PHYSICAL
AND SEXUAL. ABOUT HALF CHARACTERIZED AS NEGLECT. (3)
A/M: 3 CASES IN 21 MONTHS THROUGH APRIL 1978, ONE
REQUIRING TREATMENT. (IN REF A, A-M REPORTED 10 ABUSE
AND 3 NEGLECT CASES IN FIRST SIX MONTHS OF 1976 WITH
8 CASES OVERLAPPING TAS CASELOAD). (4) CONSULATE:
3 CASES IN LAST TWO MONTHS, NO OVERLAP. REPORTED DIRECTLY
TO EMBASSY. NO RECORD OF ANY CASES BEING REPORTED PREVIOUSLY
DIRECT TO EMBASSY. COMMENT: PROFESSIONALS INVOLVED IN
THIS WORK DO NOT BELIEVE THAT THE APPARENT REDUCTION IN
INCIDENCE, REVEALED BY THE COMPARISON OF THESE NUMBERS
WITH 1975/76, IS ACCURATE. THEY BELIEVE PROBLEM IS
MORE OR LESS THE SAME; AS IN U.S., DIFFICULTY IS IN

REACHING IT. LARGEST NUMERICAL CHANGE IS IN A-M. B.

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THE ISSUE HAS COME TO OUR ATTENTION CHIEFLY FROM THE SDC, WHICH IN EFFECT IS A QUASI-USG FACILITY, ENJOYING SUPPORT OF A-M, EMBASSY AND DOS GRANT AND ON WHOSE BOARD A-M AND EMBASSY REPRESENTATIVES PARTICIPATE. THE CONSULATE'S CASELOAD HAS NO OBVIOUS SOURCE. WITHIN THE IDENTIFIED COMMUNITY ORGANIZATIONS (WHICH OMITTS SUCH AS CHURCHES, THE AMERICAN WOMEN'S CLUB AND ALCOHOLICS ANONYMOUS WHICH PRESUMABLY ARE INVOLVED IN THE PROBLEM), THE TAS SOCIAL SERVICES OFFICE HAS CASES REFERRED TO IT BY TEACHERS AND GUIDANCE COUNSELORS, THE SDC GETS ITS CASES FROM THE TAS, BUSINESS FIRMS, CHURCHES, SELF-REFERRALS, ETC. AND THE A-M FROM MILITARY UNIT PERSONNEL AND SELF-REFERRALS. C. WE KNOW OF NO WRITTEN STATEMENTS ACCOMPANYING REFERRALS REPORTERS USUALLY HAVE FIRST-HAND KNOWLEDGE OR PERCEPTION (AS IN CASE OF A TEACHER WHO SEES AND ASKS CONCERNING BRUISES OR INVESTIGATES BEHAVIORAL PROBLEMS). THERE IS A DEFINITE RELUCTANCE ON PART OF INFORMERS TO WRITE STATEMENTS, FOR FEAR OF LIABILITY OR PERSONAL INVOLVEMENT. D. WE DO NOT UNDERSTAND THE QUESTION. THE CASELOAD REFLECTS THE AMERICAN COMMUNITY IN TEHRAN AND THE CITED INSTITUTIONS ARE PEOPLED BY THAT COMMUNITY WHICH LIVES IN AN APPROXIMATE 80 SQ. KM. AREA. E. BY DEFINITION, VIRTUALLY ALL PHYSICAL ABUSE CASES ARE EMOTIONAL ABUSE, THOUGH NOT NECESSARILY VICE VERSA. RECORDS SHOW LITTLE SEVERE PHYSICAL ABUSE; ONE A-M CASE NEEDED HOSPITAL TREATMENT. MOST INVOLVE BRUISES/ MINOR CONTUSIONS, SOME SEXUAL, ABOUT HALF NEGLECT. F. NONE IN REF D. G. SEE "E". H. AMERICAN INSTITUTIONS PROFESSIONALLY STAFFED TO RESPOND TO CHILD ABUSE PROBLEM ARE MTHOSE THREE LISTED IN PARA 5A (1-3). 1. THE EMBASSY IS SEEKING INFORMATION CONCERNING IRAN'S CHILD ABUSE LAWS AND PARTICULARLY HOW THEY MIGHT BE IMPLEMENTED

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WITH RESPECT TO A FOREIGN CHILD. A-M'S JAG ADVISES THAT THE A-M HOSPITAL, LIKE OTHER HOSPITALS IN IRAN, IS REQUIRED TO REPORT CHILD ABUSE TO THE POLICE. LOCAL ATTITUDES AND LEGAL (POLICE) RESPONSES ARE CRITICAL TO OUR WILLINGNESS TO INVOLVE AMERICANS WHEN NOT MANDATORY WITH IRANIAN CHILD ABUSE LEGAL ENVIRONMENT. WE ARE, AS STATED, PURSUING THESE QUESTIONS BUT SHARE THE NOT-SURPRISING OBSERVATION THAT IN WHAT IS STILL

A TRADITIONAL SOCIETY THE ARM OF THE LAW SEEMINGLY DOES NOT PROBE BEHIND THE WALLS OF THE FAMILY COMPOUND. SCHOOLS EXERCISE STRONG DISCIPLINE AND RELATE TO PARENTS CHIEFLY IN ACADEMIC AREAS AND, TO THE EXTENT CHILD ABUSE CASES ARE BROUGHT TO THE IRANIAN POLICE, THEY ARE FEW AND PROBABLY INCIDENTS NOT INVOLVING PARENTS OR RELATIVES AS THE ABUSERS AND ARE MORE IN THE SEXUAL AREA. THE ENTIRE FIELD OF MENTAL HEALTH IS NASCENT: E.G. THERE ARE ABOUT 100 PSYCHIATRISTS IN IRAN FOR A POPULATION OF 35 MILLION PEOPLE AND NO HOSPITAL THUS FAR INTEGRATES SERVICES OF MENTAL/SOCIAL DISORDERS IN ITS FACILITIES. J. THE EMBASSY IS SUPPORTING THE SDC WHICH IN TURN HOPES TO DEVELOP PROGRAMS IN PRIMARY PREVENTION, PARENTING GROUPS AND TEACHER EFFECTIVENESS, WORKING AS IT DOES CLOSELY WITH TAS AND A-M. TAS SOCIAL SERVICES INCLUDES FILMS AND DISCUSSION OF CHILD ABUSE IN ITS TEACHER ORIENTATION PROGRAM AND INDICATES IT WILL STRENGTHEN EFFORTS TO SENSITIZE TEACHERS AND COUNSELORS TO THE PROBLEM. THE "PROBLEM" WILL NOT BE "RESOLVED", PRACTICALLY SPENDING. THE OBJECTIVE IS TO IDENTIFY THE PROBLEM, FACILITATE THE REPORTING OF IT BY UNDERSTANDING THE RIGHTS AND IMMUNITIES OF THE ABUSERS AND INFORMERS, SUPPORT THE VEHICLES, PRIMARILY THOSE INSTITUTIONS HERETOFORE IDENTIFIED, WHICH CAN TREAT THE PROBLEM AND IDENTIFY MEANS OF LAST RESORT FOR THOSE ABUSERS WHO RESIST REMEDIAL ASSISTANCE.

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